Form (RF-3)	SUMMARY SHEET	
Change in Company's revision effective	nium or rate level produced by rate	
(1) Coverage	(2) Statewide Annual Premium Volume *	(3) Percent Change (+ or -)**
Automobile Liability Private Passenger Commercial	 \$0	-19.7%
Automobile Physical Damage Private Passenger		
Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass	<u>\$0</u>	-18.5%
6. Fidelity 7. Surety 8. Boiler and Machinery	STATE OF ILLINOIS/IDEPT	
9. Fire 10. Extended Coverage 11. Inland Marine	AUG 2 3 2005	
12. Homeowners13. Commercial Multi-Peril14. Crop Hail	PRINGFIELD, ILLINOIS	
15. Other Line of Insurance		
Does filing only apply to certain territory(r certain class(s)? If so, specify:	
• • • • • •	tes of an advisory organization, specify organizes of an advisory organization, specify organizes of the control of the contro	•
modification for all coverages, liability = except Garage Dealers' Liability (+12% mo ISO Reference Filing #(s): CA-20	1.503 physical damage = 1.5 ation) = 1.691	

AIU INSURANCE COMPANY

Name of Company

Dorothy L. Todd, Senior Filing Analyst
Official - Title

^{*} Adjusted to reflect all prior rate changes.

^{**} Change in Company's premium level which will result from application of new rates.

	Change in Company's premium or rate	level produced by rate revision effective	e 10/01/2005
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger		
	Commercial	\$165,646	-8.0%
2.	Automobile Physical Damage Private Passenger		
	Commercial	\$26,383	-8.3%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does f	iling only apply to certain territory (ter	ritories) or certain classes? If so, specif	fy:
No			
	lescription of filing. (If filing follows re filing to adopt ISO designation CA-	rates of an advisory organization, specif 2005-BRLA1, without modification.	Fy organization):
			
* A	djusted to reflect all prior rate changes.		
re	sult from application of 18 THECE I	NSURANCE	
10.	RECE	NOIS/IDFPR	
	AUG 4	2005	
	Aug 4	2005 Ale	a North America Insurance Co
	1	<u> </u>	Name of Company
	SPRINGFIELD	JULINOIS 1	ry
	L		.40
			Danne M Halewell. CISK
		Con	npliance Flings Analyst
			Official - Title

]	Coverage utomobile Liability Private Passenger	Volume (Illinois)*	<u>Change (+ or -)**</u>
]			
(
	Commercial	\$442,640	-7.3%
	utomobile Physical Damage Private Passenger		
(Commercial	\$141,564	-9.0%
3. L	iability Other Than Auto		
4. B	urglary and Theft		
5. G	lass		
6. F	idelity		
7. S	urety		
8. B	oiler and Machinery		
9. F	ire		
10. E	xtended Coverage		
11. Ir	nland Marine		
12. H	omeowners		
13. C	ommercial Multi-Peril		
14. C	rop Hail		
15. O	ther		
	Line of Insurance		
Does filing	g only apply to certain territory (to	erritories) or certain classes? If so, specify:	

All America Insurance Company Name of Company

Mrs. Petrise Meyer Sr Rates and Forms Analyst Official - Title

^{*} Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Change in Company's premium or rate level produced by rate

revision effective 02/01/2	006	•
(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger Commercial	\$-9,268	-8.0%
2. Automobile Physical Damage	7 3/200	
Private Passenger		
Commercial	-\$1,940	-8.3%
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity	.	·
7. Surety		
8. Boiler and Machinery 9. Fire	##	
10. Extended Coverage		
11. Inland Marine		Iri
12. Homeowners		Control of the Control
13. Commercial Multi-Peril		'emn' .
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain If so, specify: Changes in liabil Tractors and Trailers, PPTs, Garages cost for Hired Autos in Rule 90.B.	lity & physical damage lo ges & Public Autos; chang	ess costs for Trucks,
COSE FOR MILECU MUCOS UN MULE POPE		
Brief description of filing. (If organization	filing follows rates of n): Adoption of revised	an advisory ISO loss costs
contained in ISO Reference Filing	Number CA-2005-BRLA1	DIVISION OF INCUENAISE
		DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECENTED
* Adjusted to reflect all prior r ** Change in Company's premium lev result from application of new	rel which will	AUG 8 2005
		SPRINGFIELD, ILLINOIS
Ап	merican Alternative Insur	ance Corporation

Stephen J. Corbett - Vice President
Official - Title INS00106

Name of Company

For	m (RF-3)	SUMI	MARY SHEET	
	Change in Company's pro revision effective	emium or rate level pr 10/1/05	roduced by rate	·
	(1) Coverage		(2) Statewide Annual Premium Volume *	(3) Percent Change (+ or -)**
1.	Automobile Liability Private Passenger			40.70
2.	Commercial Automobile Physical Damage		\$104,446	-19.7%
	Private Passenger			·
	Commercial		\$101,724	<u>-18.5%</u>
3.	Liability Other Than Auto			
4.	Burglary and Theft			
5. 6.	Glass Fidelity	DIVICION		
7.	Surety	DIVISION OF IN	SULTAINCE	
8.	Boiler and Machinery	RECE	NA LE LO	
9.	Fire	0110.0		
10.	Extended Coverage	AUG 2 3	2005	···
11.	Inland Marine	_		
12.	Homeowners	SPRINGFIELD, I	LLINOIS	
13.	Commercial Multi-Peril			
14.	· •			
15.	Other			
	Line of Insurance			
Doe	s filing only apply to certain territory(s)	or certain class(s)?	If so, specify:	
				·

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of ISO's Revised Commercial Auto Loss Costs, proposed loss cost multiplier with a +4%

modification for all coverages, liability = physical damage = 1.514 1.503 except Garage Dealers' Liability (+12% modification) = 1.691

ISO Reference Filing #(s): CA-2005-BRLA1

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

AMERICAN HOME ASSURANCE COMPANY

Name of Company

Dorothy L. Todd, Senior Filing Analyst

Forr	m (RF-3)		SUMMARY SHEET	
	Change in Compa revision effective	ny's premium or ı	rate level produced by rate 10/1/05	
		k de 1 Proje		:
	(1)	. - '	(2) Statewide Annual	(3) Percent Change
	Coverage		Premium Volume *	(+ or -)**
		• • •		
1.	Automobile Liability			
	Private Passenger			40.70/
_	Commercial		\$0	
2.	Automobile Physical Damage			
	Private Passenger			40.50/
_	Commercial		\$0	-18.5%
3.	Liability Other Than Auto			
4.	Burglary and Theft			
5.	Glass			
6. 7	Fidelity			
7.	Surety Reiler and Machinery	DIVIS	SION OF INSURANCE	
8. 9.	Boiler and Machinery Fire	, 0,7	ATE OF ILLINOIS/IDEPR ECENIED	
9. 10.	Extended Coverage			
10.	Inland Marine	ſ	AUG 2 3 2005	
12.	Homeowners	1	3 2 3 3 3	
13.	Commercial Multi-Peril	SPRI	NGFIELD, ILLINOIS	
	Crop Hail			
15.	Other			
10.	Line of Insurance			
Doe	s filing only apply to certain terr	ritory(s) or certain	class(s)? If so, specify:	
			advisory organization, specify org	
	iification for all coverages, liability		1.127 physical damage = 1.	
	ept Garage Dealers' Liability (+12°		1.268	
	O Reference Filing #(s):	CA-2005-BRLA1		
		<u> </u>		

AMERICAN INTERNATIONAL SOUTH INSURANCE COMPANY

Name of Company

Dorothy L. Todd, Senior Filing Analyst
Official - Title

^{*} Adjusted to reflect all prior rate changes.

^{**} Change in Company's premium level which will result from application of new rates.

1 011	11 (141 -5)			IAIT GILLI	
	Change in Com revision effective	pany's pren	nium or rate level pro 10/1/05	oduced by rate	
	TOVISION CHOCKED	٠.		•	·
		• •			•
	(1)			(2)	(3)
	0			Statewide Annual Premium Volume *	Percent Change (+ or -)**
	Coverage			Premium volume	(+ OI -)
1.	Automobile Liability	•			
	Private Passenger				
	Commercial			\$0	-19.7%
2.	Automobile Physical Damas	ge			
	Private Passenger				
	Commercial			\$0	-18.5%
3.	Liability Other Than Auto				
4.					
5.	-				,
6.	Fidelity		_		-
7.			Divior		
	Boiler and Machinery	•	STATE	INSURANCE LINOIS/IDEPR	
	Fire		A E C	UNOIS/IDEPECE 7	
10.	Extended Coverage			MED	
11.	Inland Marine		AUG 2	2 20-	
12.	Homeowners			3 2005	
13.			SPRINGFIELD,		
14.			MOFIELD,	TLLINOIS	
15.	Other				
	Line of Insurance				***
•					
Doe	s filing only apply to certain t	erritory(s) o	r certain class(s)? I	t so, specity:	
	. <u> </u>				<u></u>
.	r)	- 6-11		i-stian anasifi aras	aniantian).
	description of filing. (If filing				
	otion of ISO's Revised Commer			physical damage = 1.5	
	ification for all coverages, liab		1.503	physical damage = 1.5	14
	ept Garage Dealers' Liability (+				
18	6O Reference Filing #(s):	CA-2005-E	סתנאו		
					

BIRMINGHAM FIRE INSURANCE COMPANY OF PA

Name of Company

Dorothy L. Todd, Senior Filing Analyst
Official - Title

^{*} Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

Form (RF-3)

SUMMARY SHEET

(Change in Company's premium or rate	e level produced by rate revision effective	February 1, 2006
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger		
	Commercial	\$2,785,448	-7.3%
2.	Automobile Physical Damage	<i>\$2,763,110</i>	7.570
	Private Passenger		
	Commercial	\$763,021	-9.0%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
D 6		itanias) an annair alassas? If an annaifiu	
na na	ining only apply to certain territory (te	erritories) or certain classes? If so, specify:	
- IIa			
Drief d	lecarintian of filing (If filing follows	rates of an advisory organization, specify of	roanization):
Ador	ating ISO's Loss Costs & Rules filing	Designation #'s: CA-2005-BRLA1 & CA-2	2005-RCP1. Also added
	ication to our Company pages for Hig		
_			

Central Mutual Insurance Company Name of Company

Mrs. Petrise Meyer Sr Rates and Forms Analyst Official - Title

 ^{*} Adjusted to reflect all prior rate changes.
 ** Change in Company's premium level which will result from application of new rates.

Form i	(RF-3)	۱
1 01111	ロンにゃい	ı

SUMMARY SHEET

	Change in Company's premium or r revision effective	ate level produced by rate 10/1/05	•
	(1)	(2) Statewide Annual	(3) Percent Change
	Coverage	Premium Volume *	(+ or -)**
1.	Automobile Liability Private Passenger	- C475 005	40.79/
	Commercial	<u>\$475,235</u>	19.7%
2.	Automobile Physical Damage Private Passenger Commercial	\$89,207	-18.5%
3	Liability Other Than Auto		10.0 70
3. 4.		 	
	Glass		<u> </u>
	Fidelity		
	Surety	·	
	Boiler and Machinery		
	Fire	***************************************	·
	Extended Coverage		
	Inland Marine		
12.			
13.	Commercial Multi-Peril	DIVISION	F INSURANCE
14.	Crop Hail	I STATE OF (
	Other		ERVED
	Line of Insurance	AUG	2 3 2005
Doe:	s filing only apply to certain territory(s) or certain	class(s)? If so, specify: SPRINGFIE	LD, ILLINOIS
Adop modi exce	description of filing. (If filing follows rates of an ation of ISO's Revised Commercial Auto Loss Costs, ification for all coverages, liability = apt Garage Dealers' Liability (+12% modification) = ISO Reference Filing #(s): CA-2005-BRLA1	proposed loss cost multiplier with a +4 1.503 physical damage = 1.51	1%

COMMERCE & INDUSTRY INSURANCE COMPANY

Name of Company

Dorothy L. Todd, Senior Filing Analyst

^{*} Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Change in Company's premium or rate level produced by rate revision effective 02.01.06

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage	\$121,084	-6.2%
Private Passenger Commercial 3. Liability Other Than Auto	\$104,821	-5.0%
4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety		
8. Boiler and Machinery 9. Fire 10. Extended Coverage		
12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail		
Line of Insurance		
Does filing only apply to certain If so, specify: No	territory (territories)or	c certain classes?
Brief description of filing. (If organization): Adopting ISO loss co	sts and related rule CA-2005-BRLA1 and CA-

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

REC	EIVED
AUG	1 2005

CUMIS Insurance Society, Inc.

Name of Company

IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

Kim E. Erfurth Associate Director
Official - Title

	(2)	(3)
	Annual Written Premium	Percent
Coverage	<u>Volume (Illinois)*</u>	Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial	8,587,950	0.0%
2. Automobile Physical Damage Private Passenger	grammer firms (a. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	· · · · · · · · · · · · · · · · · · ·
Commercial	2,672,896	0.0%
3. Liability Other Than Auto	gar mengan selember seben seben persebagai seberah menghaban sebagai seben menghaban seben menghaban seben men	
4. Burglary and Theft	t i urium n'i gine in impres imma i majorg	. Mag .as a . — — — — — — — — — — — — — — — — — —
5. Glass	والمعادمة موسود والمستخدمة والمستخدم والمستخدمة والمستخدمة والمستخدمة والمستخدمة والمستخدمة والمستخدم والمستخدمة والمستخدمة والمستخدمة والمستخدمة والمستخدمة والمستخدم والمست	
5. Fidelity	•• • • • • • • • • • • • • • • • • • •	
7. Surety	≱A ayadan may si i i inan makani aka i k	in the second se
8. Boiler and Machinery	• • • • • • • • • • • • • • • • • • • •	
9. Fire	பள்ளாயை சம்பி சார்களாயார் சிசி	the second of the second
D. Extended Coverage	tion with the control of the control	
I. Inland Marine		DIVISION OF INSURANCE STATE OF ILLINOIS/IDFPR
2. Homeowners	a a composition of the compositi	STATE OF ILLINOISHING
3. Commercial Multi-Peril	en 1 de la Cintra de la deservación de establishment de e	一一一一
4. Crop Hail	germy - application of the collection is really that the second of the collection of	AUG. 2 9 2005
5. Other	The second control of the second seco	2005
Line of Insurance	a designation of a state of the	SPRINGFIELD, ILLINOIS
filing only apply to certain territory (territo	ories) or certain classes? If so, specify:	anole
· · · · · · · · · · · · · · · · · · ·	ing and comment of the	a mena gamagan agas a sa
waste was the second of the second	the statement of the statement seems and	A A MARKAGO TO STOLEN OF A STOLEN OF A STOLEN ON A STOLEN OF A
description of filing. (If filing follows rates	of an advisory organization, specify orga	nization):
filing, we are adopting ISO advisory loss		
d classification plan, ISO revision designat		and the control of th
er CA-2003-IALL1. We are also filing our	the state of the s	to the differentiation and their states of the contract of the

* Adjusted to reflect all prior rate changes

** Change in Company's premium level which will result from application of new rates; change is based on Chubb Group data.

Federal Insurance Company

Name of Company

Allyn - Supa Acting
Official - Title

	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois) *	<u>Change (+ or -) **</u>
•	Automobile Liability Private Passenger		
·.	Commercial Automobile Physical Damage Private Passenger	620191	-0.2%
	Commercial	209037	-0.2%
.	Liability Other Than Auto		
	Burglary and Theft		
j.	Glass		
i.	Fidelity		
	Surety		
	Boiler and Machinery		
).	Fire	· · · · · · · · · · · · · · · · · · ·	
).	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
	Other		
-	Line of Insurance	1. 24 1. 27 1	
	s filing only apply to certain territory quipment Type of Business Only	(territories) or certain classes? If	so, specify:
	f description of filing. (If filing follow evising Type of business factors.	s rates of an advisory organizatio	n, specify organization):
C	djusted to reflect all prior rate cl hange in Company's premium level ill result from application of new rate	which es.	e Insurance Company
		Na	me of Company
		3~	i Borchert
			- Siercey
			/ice President Official - Title

Form (RF-3)

SUMMARY SHEET

	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger	222,000	-24%
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger	74,000	-16%
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
0.	Extended Coverage	M:	
1.	Inland Marine		
2.	Homeowners		
3.	Commercial Multi-Peril		
4.	Crop Hail		
5.	Other		
	Line of Insurance		
es f	iling only apply to certain territory (t	erritories) or certain classes? If so, specify:	
_			
		s rates of an advisory organization, specify o	
ate	decreases averaging -24% applicable	to Garage Liability and -16% applicable to	Garage Physical Damage.

* Adjusted to reflect all prior rate changes.
* Change in Company's premium level which will result from application of new rates.

First Financial Insurance Company
Name of Company

Charles S. Whiffen-Asst. Sect.

	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability Private Passenger		
	Commercial	1,044,721	-16.1%
2.	Automobile Physical Damage Private Passenger		
	Commercial	312,024	-11.0%
3.	Liability Other Than Auto		
4. I	Burglary and Theft		
5. (Glass		
6. I	Fidelity		
7.	Surety	····	
8. I	Boiler and Machinery		
9. I	Fire		
10. I	Extended Coverage		
11.	nland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15. (Other		
	Line of Insurance		
	ig only apply to certain territory (t	erritories) or certain classes? If so, specify:	
No.			····
Brief des	cription of filing. (If filing follow	s rates of an advisory organization, specify of	organization):
A dontio	n of ISO 10/2005 advisory prospe	ective loss costs with a multiplier of 1.375 fo	r Liability and 1.578 for

Florists' Mutual Insurance Co
Name of Company

Christine Morrison, ACP, AIS
Compliance Specialist
Official - Title

H29219D

^{*} Adjusted to reflect all prior rate changes.

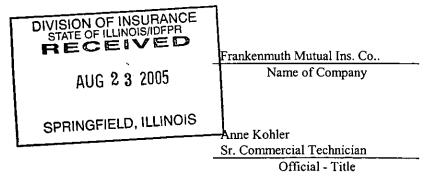
^{**} Change in Company's premium level which will result from application of new rates.

Form (RF-3)

SUMMARY SHEET

		(1)	(2) Annual Premium	(3) Percent
	2	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobi	le Liability		
	Private I	Passenger	\$353,422	0%
	Commer	cial	\$1,718,980	+7.5%
2.	Automobi	ile Physical Damage		
	Private F	assenger	\$286,461	0%
	Commer	cial	\$748,585	_0%
3.	Liability (Other Than Auto		
4.	Burglary a	and Theft		
5.	Glass			
6.	Fidelity			
7.	Surety			
8.	Boiler and	d Machinery		
9.	Fire			
10.	Extended	Coverage		
11.	Inland Ma	arine		
12.	Homeowi	ners		
13.	Commerc	ial Multi-Peril		
14.	Crop Hail		<u> </u>	
15.	Other	Garage Liability	\$53,161	0%
		Garage Phys Dmg	\$49,893	_0%
		Line of Insurance		

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.



Forr	m (RF-3)	SUMMARY SHEET	
	Change in Company's premium o revision effective	r rate level produced by rate	
	(1) Coverage	(2) Statewide Annual Premium Volume <u>*</u>	(3) Percent Change (+ or -)**
1	Automobile Liability		
	Private Passenger		
	Commercial	\$2,583,092	-19.7%
2	Automobile Physical Damage		
	Private Passenger		
	Commercial	\$338,277	-18.5%
3.	T		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.			-
10.	Extended Coverage		
11.	Inland Marine	DIVISIO	N. Comment
12.	Homeowners	STATE	N OF INSURANCE
13.	Commercial Multi-Peril	RE	CEIVEPR
14.	Crop Hail		
15.	Other	AU	G 2 3 2005
	Line of Insurance	1	· · · · · · · · · · · · · · · · · · ·
		SPRINGE	TELD, ILLINOIS
Doe	s filing only apply to certain territory(s) or certa	in class(s)? If so, specify:	ILLINOIS

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of ISO's Revised Commercial Auto Loss Costs, proposed loss cost multiplier with a +4%

The difference of the contraction of t

modification for all coverages, liability = 1.503 physical damage = 1.514

except Garage Dealers' Liability (+12% modification) = 1.691

ISO Reference Filing #(s): CA-2005-BRLA1

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

GRANITE STATE INSURANCE COMPANY

Name of Company

Dorothy L. Todd, Senior Filing Analyst

(1)	(2)	(3)	
	Annual Written Premium	Percent	
Coverage	<u>Volume (Illinois)*</u>	<u>Change (+ or -)**</u>	
1. Automobile Liability			
Private Passenger			
Commercial	1,528,748	0.0%	
2. Automobile Physical Damage Private Passenger		• • • • • • • •	
Commercial	431,331	0.0%	
	401,001	0.070	
Liability Other Than Auto Purglam and Theft		and the second second second second	
4. Burglary and Theft	e comment of the second of the		
5. Glass	• •		
6. Fidelity	المارا المساوية المنافقة المنا		
7. Surety	وسنست مصدد فدوسه مواد	a second of the second	
8. Boiler and Machinery	graphy of the graphy of the graphy	DIVISION OF INSURA	
9. Fire	• · · · · · · · · · · · · · · · ·	STATENOE	
10. Extended Coverage		C LINOUR	ANG
11. Inland Marine	and the second s		PACE
12. Homeowners	gamenta a maganta anno sala menancia di menancia di selata di	AUG 2 9 2005	0 /
13. Commercial Multi-Peril	para an agreement an arrangement of the second	~ 9 2005	/
14. Crop Hail	grand of the control	SPRINGER	
15. Other	gan lange on the same agreement was a single	TELD, ILIN	
Line of Insurance		SPRINGFIELD, ILLINOIS	
s filing only apply to certain territory (territ	orige) or certain classes? If so, specify:		<i></i>
thing only apply to certain territory (territory	ories, or certain classes. It so, speeny.		
	apar sapar a — — — — — — — — — — — — — — — — — —		-
···	The state of the s	and the second of the second o	• • •
f description of filing. (If filing follows rate	s of an advisory organization, specify organ	nization):	
is filing, we are adopting ISO advisory loss			
ed classification plan, ISO revision designa			n
ber CA-2003-IALL1. We are also filing our			•
iability basic combined single limit from \$2	5,000 to \$100,000 and the physical damage	deductible factors contained in ISO	-
98, deductible insurance.	• • • • • • • • • • • • • • • • • • • •	•	

* Adjusted to reflect all prior rate changes

** Change in Company's premium level which will result from application of new rates; change is based on Chubb Group data.

Great Northern Insurance Company

Name of Company

Jun - Sul + Acting

For	m (RF-3)	SUMMARY SHEET	
	Change in Company's premit revision effective	um or rate level produced by rate	
	(1) Coverage	(2) Statewide Annual Premium Volume *	(3) Percent Change (+ or -)**
1.	Automobile Liability Private Passenger Commercial	\$604,203	-19.7%
2.	Automobile Physical Damage Private Passenger Commercial	\$133,331	-18.5%
3. 4. 5.	Liability Other Than Auto Burglary and Theft Glass		
6. 7. 8.	Fidelity Surety Boiler and Machinery		
	Fire Extended Coverage Inland Marine	Divio	
12. 13.	Homeowners Commercial Multi-Peril		VED
14. 15.	Crop Hail Other Line of Insurance	SPRINGEIELD	
Doe	s filing only apply to certain territory(s) or o	SPRINGFIELD, II certain class(s)? If so, specify:	LINOIS

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of ISO's Revised Commercial Auto Loss Costs, proposed loss cost multiplier with a +4%

modification for all coverages, liability = 1.503 physical damage = 1.514

except Garage Dealers' Liability (+12% modification) = 1.691

ISO Reference Filing #(s): CA-2005-BRLA1

* Adjusted to reflect all prior rate changes.

ILLINOIS NATIONAL INSURANCE COMPANY

Name of Company

Dorothy L. Todd, Senior Filing Analyst

^{**} Change in Company's premium level which will result from application of new rates.

For	·m (RF-3)	SUMMARY SHEET	
	Change in Company's revision effective	premium or rate level produced by rate	
	(1)	(2) Statewide Annual	(3) Percent Change
	Coverage	Premium Volume *	(+ or -)**
1.	Automobile Liability Private Passenger		
2.	Commercial Automobile Physical Damage Private Passenger	\$56,008	-19.7%
3.	Commercial Liability Other Than Auto	\$45,825	-18.5%
4. 5.	Burglary and Theft Glass		
6. 7.	Fidelity Surety	<u> </u>	
8. 9.	Boiler and Machinery Fire		
10.	Extended Coverage		
11.	Inland Marine		<u> </u>
12.	Homeowners	DIVISION OF	
13.	Commercial Multi-Peril	STATE OF IL	INSURANCE T
14.	Crop Hail		INSURANCE LINDIS/IDFPR
15.	Other	Alic 9	3 2005
	Line of Insurance		<u> ฮ </u>

Brief description of filing.	(If filing follows rates of an advisory organization, specify organization):
Adoption of ISO's Revised (Commercial Auto Loss Costs, proposed loss cost multiplier with a +4%

Does filing only apply to certain territory(s) or certain class(s)? If so, specify: SPRINGFIELD, ILLINOIS

modification for all coverages, liability = 1.503 physical damage = 1.514

except Garage Dealers' Liability (+12% modification) = 1.691

ISO Reference Filing #(s): CA-2005-BRLA1

THE INSURANCE COMPANY OF THE STATE OF PENNSYLVANIA Name of Company

Dorothy L. Todd, Senior Filing Analyst

^{*} Adjusted to reflect all prior rate changes.

^{**} Change in Company's premium level which will result from application of new rates.

RF-3)

Change in Company's	premium or rate level produced by rate
revision effective	10/1/05

	(1) Coverage	(2) Statewide Annual Premium Volume *	(3) Percent Change (+ or -)**
1.	Automobile Liability		
••	Private Passenger		
	Commercial		-19.7%
2.	Automobile Physical Damage	401.00	
	Private Passenger		
	Commercial	\$1,276	-18.5%
3.	Liability Other Than Auto		
4.	Burglary and Theft		· · · · · · · · · · · · · · · · · · ·
5.	Glass		
6.	Fidelity		
7.	•		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		· · · · · · · · · · · · · · · · · · ·
12.	Homeowners	DIVIS	ONO
13.	Commercial Multi-Peril	STAT	ON OF INSURANCE
14.	Crop Hail		CENOIS/IDFPR
15.	Other		
	Line of Insurance		NUG 2 3 2005
Doe	s filing only apply to certain territory(s) or certai	!	GFIELD, ILLINOIS

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of ISO's Revised Commercial Auto Loss Costs, proposed loss cost multiplier with a +4%

modification for all coverages, lia	ability =	1.503	physical damage =	1.514	
except Garage Dealers' Liability	(+12% modification) =	1.691	•		
ISO Reference Filing #(s):	CA-2005-BRLA1				

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA Name of Company

Dorothy L. Todd, Senior Filing Analyst

Form (RF	-3)
----------	-----

Change in Company's premium or	rate level produced by rate
revision effective	10/1/05

	(1)	(2)	(3)
		Statewide Annual	Percent Change
	Coverage	Premium Volume *	(+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial	\$202,140	-19.7%
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial	\$56,486	-18.5%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	DIVISION	
13.	Commercial Multi-Peril	STATE OF	FINSURAN
14.	Crop Hail		NOIS/IDFPR
15.	Other		DE INSURANCE LUNOIS/IDEPR
	Line of Insurance	70G 2	3 2005
		Span	
Doe:	s filing only apply to certain territory(s) or certain class(s)?	If so, specify: SPRINGFIELD	·
			LLINOIS
			······································
	description of filing. (If filing follows rates of an advisory of		,
	tion of ISO's Revised Commercial Auto Loss Costs, proposed		
	ification for all coverages, liability = 1.277	physical damage = 1.287	7
exce	ept Garage Dealers' Liability (+12% modification) = 1.438		

ISO Reference Filing #(s):

CA-2005-BRLA1

NEW HAMPSHIRE INSURANCE COMPANY

Name of Company

Dorothy L. Todd, Senior Filing Analyst

^{*} Adjusted to reflect all prior rate changes.

^{**} Change in Company's premium level which will result from application of new rates.

Private Passenger	Volume (Illinois)*	<u>Change (+ or -)**</u>
~		
~		
Commercial	24,141	0.0%
. Automobile Physical Damage	*** * * **** * * * ****	## * * * * * * * * * * * * * * * * * *
Private Passenger		
Commercial	0	0.0%
Liability Other Than Auto		e i i u u u u u u u u u u u u u u u u u
. Burglary and Theft	g an electronic or seminary to the first the part of the electronic	\$ house form the date of sign and servance, and change
. Glass		•
. Fidelity		• • • • • • • • •
. Surety		••
Boiler and Machinery	արձում և աջու գրում առաջանա համաձուտուց ապագանաց է	er den en in Mariem in de la Company de la C
. Fire	a company of the second	~
. Extended Coverage	 dept. or operator report that is smallered the artificials are deliver at the deliver. 	DIVISION OF INS STATE OF ILLINOIS AUG 2 9 2000
. Inland Marine	,	STATE OF
. Homeowners	The state of the s	E OF ILLINS
. Commercial Multi-Peril		BUS
. Crop Hail		SPRINGER 29 2005
. Other		Z SPD. 2005
Line of Insurance		MINGFIE
		iclo, Ili
		SPRINGFIELD, ILLINOIS
ling only apply to certain territory (territor	ies) or certain classes? If so, specify:	
	مستعدده والمستعدد والمستعد والمستعدد والمستعد والمستعدد	
<u>.</u>		
escription of filing. (If filing follows rates of		
filing, we are adopting ISO advisory loss co classification plan, ISO revision designation		

* Adjusted to reflect all prior rate changes

rule 98, deductible insurance.

** Change in Company's premium level which will result from application of new rates; change is based on Chubb Group data.

Pacific Indemnity Company

Name of Company

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate le	evel produced by rate revision effective	October 1, 2005
(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
<u> </u>		
Automobile Liability Private		
Passenger Commercial	\$126,420	4.3%
Automobile Physical Damage	.	
Private Passenger Commercial	\$84,437	4.3%
Liability Other Than Auto		
4. Burglary and Theft		<u> </u>
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. OtherLine of Insurance		
Line of Insurance		
Dan filing only apply to portain torritory	(territories) or certain classes? If so, specify: h	Jo.
Does filing only apply to certain territory	(terniones) or certain classes? If so, specify. I	<u> </u>
	·	
Brief description of filing (If filing follows	rates of an advisory organization, specify or	ganization): Adopt the following ISC
loss costs.		garia
1033 00010.	14 april 1	
*Adjusted to reflect all prior rate changes	s.	
**Change in Company's premium level w	which will result from application of new rates.	
	••	
	Pharmacists M	lutual Insurance Company
		ame of Company
	John Kellenbe	rger, State Filings Analyst
		Official - Title

	(1)	(2)	(3)
	Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger	0.00.100	
_	Commercial	268,175	- 11.27
2.	Automobile Physical Damage		
	Private Passenger Commercial	126.567	7.07
3.	Liability Other Than Auto	136,567	- 7.97
<i>3.</i> 4.	Burglary and Theft		
5.	Glass	· · · · · · · · · · · · · · · · · · ·	
5. 6.	Fidelity		· · · · · · · · · · · · · · · · · · ·
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	·	
10.	Extended Coverage	····	
11.	Inland Marine	·····	
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other	· · · · · · · · · · · · · · · · · · ·	·
	Line of Insurance		
_			
	iling only apply to certain territory (territories) or certain classes? If so, specify:	
No		<u> </u>	
	1 1 2 600 7000 64		
sriei d	description of filing. (If filing follow	rs rates of an advisory organization, specify o	rganization):
Ame	nument of base rate and rating factor	s resulting in overall program change of - 10.	.2%

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECERVED

AUG 2 9 2005

SPRINGFIELD, ILLINOIS

Progressive Casualty company
Name of Company

Tammy Manski Product Manager
Official - Title

H29219D

Form (RF-3)

SUMMARY SHEET

	Change in Company's premium or rate	level produced by rate revision effect	tive <u>8/19/05</u>
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial	10,583,776	- 11.27
2.	Automobile Physical Damage Private Passenger		
	Commercial	5,466,776	- 7.97
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		•
11.	Inland Marine		· • • • • • • • • • • • • • • • • • • •
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other	······································	
	Line of Insurance		
Does	filing only apply to certain territory (te	ritories) or certain classes? If so, spe-	cify:
No			<u> </u>
	description of filing. (If filing follows		
Amo	endment of base rate and rating factors	resulting in overall program change of	f - 10.2%
	· · · · · · · · · · · · · · · · · · ·		
	adjusted to reflect all prior rate changes		
	Change in Company's premium level wh	ich will	
r	esult from application of new rates.		
	DIVISION	OF INSURANCE	
	STATE OF	ILLINOIS/IDFPR	
	, ,,,,,		
	,	Pr	rogressive Premier Insurance
	AUG	2 9 2005 <u>C</u>	ompany
	I		Name of Company
	SPRINGE	ELD HANGE	
	- Tinde	ELD, ILLINOIS	
			ommun Manualdi Birili i 125
			ammy Manski Product Manager
	4.0-		Official - Title

Coverage Itomobile Liability rivate Passenger commercial Itomobile Physical Damage rivate Passenger	(2) Annual Premium Volume (Illinois)* 423,561	(3) Percent Change (+ or -)** - 11.27
ntomobile Liability rivate Passenger commercial ntomobile Physical Damage rivate Passenger		
rivate Passenger Commercial Itomobile Physical Damage rivate Passenger	423,561	- 11.27
ommercial tomobile Physical Damage rivate Passenger	423,561	- 11.27
ttomobile Physical Damage rivate Passenger	423,561	11.27
rivate Passenger		
	<u> </u>	
ommercial	253,013	- 7.97
ability Other Than Auto		
rglary and Theft		
ass		
lelity		
rety		
iler and Machinery	-	
e	-	
tended Coverage		
and Marine		
meowners		
mmercial Multi-Peril		
op Hail		
her		
Line of Insurance		
only apply to certain territory	(territories) or certain classes? If so, specify:	
,		
		
	ass delity rety ciler and Machinery re tended Coverage and Marine omeowners ommercial Multi-Peril op Hail her Line of Insurance	ass delity rety ider and Machinery e tended Coverage and Marine omeowners ommercial Multi-Peril op Hail her

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPS RECENTION

AUG 2 9 2005

SPRINGFIELD, ILLINOIS

Progressive Universal Insurance Company

Name of Company

Tammy Manski Product Manager
Official - Title

H29219D

Form (RF-3)

SUMMARY SHEET

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger		
2.	Commercial Automobile Physical Damage Private Passenger	1,246,222	-2%
3.	Commercial Liability Other Than Auto	369,088	-2%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage	-	
11.	Inland Marine		•
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does f	iling only apply to certain territory (to	erritories) or certain classes? If so, specify:	

* Adjusted to reflect all prior rate changes.
 ** Change in Company's premium level which will result from application of new rates.

QBE Insurance Corporation Name of Company

Judy Caporini - Product Compliance Analyst Official - Title

H29219D

	Change in Company's pre revision effective	mium or rate level produced by ra October 1, 2005	te
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger	N/A	-8.1% (Liab & PD)
2.	Commercial Automobile Physical Damage	IN/A	-8.178 (LIAD & 1 D)
۷.	Private Passenger		
	Commercial	N/A	-8.1% (Liab & PD)
3.	Liability Other Than Auto		-
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	-	
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		IVISION OF INSURANCE
15.	Other		STATE OF HUNDISHDEED 1
	Line of Insurance	·	RECEIVED
Пов	s Filing only apply to certain territor	v (territories) or certain	AUG 2 9 2005
	ses? If so, specify:		
oido			SPRINGFIELD, ILLINOIS
	f description of filing. (If filing follov anization, specify organization):	vs rates of an advisory Adoption of ISO's Revised C Advisory Prospective Loss C	
	 * Adjusted to reflect all prior rate cl * Change in Company's premium leading result from application of new rate 	evel which will es.	
		S	Seneca Insurance Company

Name of Company

Douglas M. Libby - President
Official - Title

Change in Company's pre revision effective 10/		y rate
(1)	(2)	(3)
(1)		
Coverage		
coverage	VOLUME (IIIIIOIB)	Change (+ OI -)
 Automobile Liability 		
Private Passenger		
Commercial	2,503,667	-6.0%
2. Automobile Physical Damage		
Private Passenger		
Commercial	1.079.393	-6.2%
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		<u> </u>
7. Surety		
Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	Annual Premium Volume (Illinois)* Change (+ or -)** Column Change Ch	
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Line of Insurance		
Does filing only apply to cert If so, specify: No	ain territory (territories)or	certain classes?
organization, specify organiza	tion):	- · · ·
Adoption of ISO's loss costs a	and a revision to our loss cos	t multipliers.
* Adjusted to reflect all pri ** Change in Company's premium result from application of	level which will	
	Sentry Insurance A Mutu	ial Company
	Janet Fagan - Vice President,	Chief Actuary
	Official - Tit	le
H29219D		

Change in Comp revision effec		or rate level produce	ed by rate
(1)		(2) Annual Premium	(3) Percent
<u>Coverage</u>		Volume (Illinois) *	Change (+ or -) **
1. Automobile Liabili Private Passenge Commercial	r	8,080,463	-1.0%
2. Automobile Physica Private Passenge Commercial		2,521,876	-2.5%
3. Liability Other Th 4. Burglary and Theft		2,321,070	
5. Glass 6. Fidelity			
7. Surety			
8. Boiler and Machine 9. Fire			
10. Extended Coverage 11. Inland Marine			
 Homeowners Commercial Multi-F 	eril		
14. Crop Hail 15. Other	_	, <u></u>	
Does filing only apply If so, specify: No		erritory (territories	or certain classes?
Brief description of organization, specify			f an advisory
Adoption of ISO's los	s costs and a	revision to our loss	cost multipliers.
* Adjusted to reflect ** Change in Company's result from applica	s premium leve	el which will	
	Sentry	Select Insurance Compa Name of Cor	any - Dealer Operations
		Name of Col	upcarry
	Janet 	: Fagan - Vice Preside	-
H29219D	-	Official -	Title

(1)	(2)	(3)	
	Annual Written Premium	Percent	
Coverage	Volume (Illinois)*	Change (+ or -)**	
1. Automobile Liability			
Private Passenger			
Commercial	2,640	0.0%	
2. Automobile Physical Damage	garinge i gen ge en e ue inspecies graen i inte	** * **** ** * * * * * * * * * * * * *	
Private Passenger			
Commercial	2,457	0.0%	
3. Liability Other Than Auto	to the terminal of the contract of the contrac		
4. Burglary and Theft	• • • • • • • • • • • • • • • • • • • •		
5. Glass		· · ·	
6. Fidelity	•		
7. Surety	Forest Company of the	• • • •	
8. Boiler and Machinery	gradient of the second of the	· · · · · · · · · · · · · · · · · · ·	
9. Fire	department of the second of th		
10. Extended Coverage	garan e agarahagan menengalahan manya belahilan da 1996 melalah 1		
11. Inland Marine	AND A SECOND SEC	PATE OF ILL INSU	Date
12. Homeowners	والمستقدين والمنظورة والمستقدية والمالي والمستقولة	NOIS/	DEPLOE
13. Commercial Multi-Peril	وهيئية والمتداد خاجب وهيدهم احتجابها	Allo	
14. Crop Hail	a processing supersystems personal contract on a supported size of supported sizes of	1 29 2005	. /
15. Other	** ** * * * * * * * * * * * * * * * *	SPDIA.	· /
Line of Insurance	,	AUG 2.9 2005 SPRINGFIELD, ILLINO	/
		- VariNO)	is /
es filing only apply to certain territory (territ	ories) or certain classes? If so specify		
es thing only apply to certain territory (territ	ories) of certain classes: If so, specify.		
* * * * * * * * * * * * * * * * * * * *	en english to the same of the english of the englis		
* ****	er en	•	*
ef description of filing. (If filing follows rate	s of an advisory organization, specify organ	ization):	
this filing, we are adopting ISO advisory loss	• • • • •		
ised classification plan, ISO revision designa	and the second s	The contract of the contract of the contract of	ition
mber CA-2003-IALL1. We are also filing our	Carrier and the Carrier Company and the Carrier and the Carrie	and a market company of the company	and the second response
liability basic combined single limit from \$2			• • •
	The same of the sa	and the second of the second of the	

* Adjusted to reflect all prior rate changes

** Change in Company's premium level which will result from application of new rates; change is based on Chubb Group data.

Vigilant Insurance Company

Name of Company

It f. flan - Svlo A Las.
Opticial - Title